ABSTRACT OF THE DISCLOSURE

A method of forming prosthetic sockets is provided that first creates a negative mold of the patient's residual limb while it is disposed in a positive flexion position. The mold is then removed and shaped to permit the desired range of flexion when the mold is repositioned on the residual limb. A second cast is made of the residual limb that incorporates the mold. A positive model of the residual limb is then formed, from which test or definitive sockets may be formed. The present method further lends itself to the formation of sockets using a cast-in-place methodology while the limb is disposed in a positive flexion position.